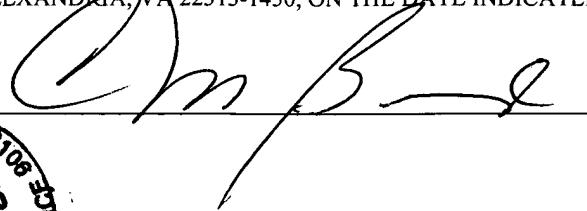


I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

BY: 

Date: 3/8/05

MAIL STOP AMENDMENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:
William T. Gurnéé *et al.*

Conf. No.: 6477 : Group Art Unit: 3743

Appln. No.: 10/087,042 : Examiner: Aaron J. Lewis

Filing Date: February 28, 2002 : Attorney Docket No.: 383-9U1

Title: HYPERBARIC OXYGEN THERAPY SYSTEM CONTROLS

AMENDMENT TRANSMITTAL LETTER

Transmitted herewith is an Amendment in the above-identified application.

Substitute Specification.
 Small Entity status:
 has previously been claimed/established.
 is hereby claimed under 37 C.F.R. §1.27, as an Independent Inventor, or a Small Business Concern, or a Non-Profit Organization.

The additional claim fees have been calculated as follows:

| | | | | | SMALL ENTITY | | LARGE ENTITY | |
|--|---|-----|---------------------------------------|------------------|--------------|------------|--------------|-------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | RATE | ADDITIONAL FEE |
| TOTAL | 23 | (-) | 34 | 0 | x25 | 0 | x50 | |
| INDEP. | 5 | (-) | 9 | 0 | x100 | 0 | x200 | |
| <input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | +\$180 | | +\$360 | |
| | | | | | TOTAL | 0 | TOTAL | |

The additional claim fees are being paid by:

A check in the amount of \$ _____.00.

Authorization to charge and/or credit Deposit Account No. 50-1017 (Billing No. 200383.0012) as noted below. A duplicate copy of this sheet is enclosed.

Any overpayments or deficiencies in the above-calculated fee.

Additional claim fee in the amount of \$ _____.00 as calculated above.

Any additional fees required under 37 C.F.R. § 1.16 and/or § 1.17.

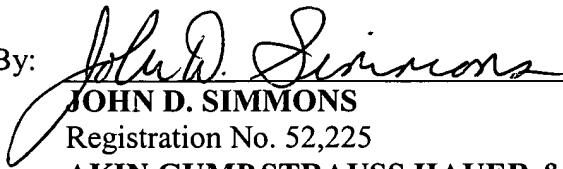
In the event that a Petition for Extension of Time is required, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account.

CORRESPONDENCE ADDRESS

March 8, 2005

(Date)

By:


John D. Simmons

JOHN D. SIMMONS

Registration No. 52,225

AKIN GUMP STRAUSS HAUER & FELD LLP

One Commerce Square
2005 Market Street, Suite 2200
Philadelphia, PA 19103-7013
Telephone: 215-965-1200
Direct Dial: 215-965-1238
Facsimile: 215-965-1210
E-Mail: jsimmons@akingump.com

JDS:cmb
7363752

Enclosures